

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Graves for Congress

ADDRESS (number and street)

2345 Grand Boulevard - Suite 2400

Check if different
than previously
reported. (ACC)

Kansas City

MO

64108

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00359034

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MO

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
08 / 07 / 2012in the
State of

MO

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2012

through

M M / D D / Y Y Y Y
07 / 18 / 2012*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Jean Paul Bradshaw

Signature of Treasurer

Jean Paul Bradshaw

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 24 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 21

Write or Type Committee Name

Graves for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	16350.00	1039379.01
(b) Total Contribution Refunds (from Line 20(d))	48.00	1048.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	16302.00	1038331.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	48255.52	505615.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1236.80
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	48255.52	504379.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	353526.64	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5522.41	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

Graves for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	2

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

9850.00

246847.00

(ii) Unitemized.....

500.00

8471.00

(iii) TOTAL of contributions from individuals ▶

10350.00

255318.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

6000.00

784061.01

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

16350.00

1039379.01

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

1236.80

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

46.44

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

16350.00

1040662.25

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48255.52	505615.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	48.00	48.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	48.00	1048.00
21. OTHER DISBURSEMENTS	0.00	292800.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	48303.52	799463.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	385480.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16350.00
25. SUBTOTAL (add Line 23 and Line 24).....	401830.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48303.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	353526.64

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

Rita J. Cosentino

A.

Mailing Address 321 Chelmsford Court

City

Lees Summit

State

MO

Zip Code

64064-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2012

Transaction ID : 20720.C15949

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

Victor Cosentino

B.

Mailing Address 8700 East 63rd Street

City

Kansas City

State

MO

Zip Code

64133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cosentino Foods

Occupation

Co-Owner

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5048.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2012

Transaction ID : 20720.C15950

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

Joel T. Spencer

C.

Mailing Address 3521 Highway H

City

Oak Grove

State

MO

Zip Code

64075

FEC ID number of contributing
federal political committee.

C

Name of Employer

OODA

Occupation

Executive Vice President

Receipt For: 2012

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2012

Transaction ID : 20720.C15947

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

Terry L. Button

A.

Mailing Address Box 223

City

Rushville

State

NY

Zip Code

14544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Terry L. Button Farms

Occupation

Farmer

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2012

Transaction ID : 20720.C15938

Amount of Each Receipt this Period

350.00

Receipt

Full Name (Last, First, Middle Initial)

James J. Johnston

B.

Mailing Address P.O. Box 1000

City

Grain Valley

State

MO

Zip Code

64029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Owner-Operator Independent Dri

Occupation

President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2012

Transaction ID : 20720.C15941

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

Gregory P. Shelton

C.

Mailing Address P.O. Box 249

City

Eagleville

State

MO

Zip Code

64442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shelton Fireworks

Occupation

Owner

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2012

Transaction ID : 20720.C15951

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

9850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield Association PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>18</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		18		2012
M M	/	D D	/	Y Y Y Y									
07		18		2012									
Mailing Address 1310 G Street, NW		Transaction ID : 20724.C15953											
City Washington	State DC	Zip Code 20005											
FEC ID number of contributing federal political committee. C C00194746		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
Name of Employer		Occupation											
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									

B. Full Name (Last, First, Middle Initial) American Hospital Association PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>18</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		18		2012
M M	/	D D	/	Y Y Y Y									
07		18		2012									
Mailing Address 325 Seventh Street, NW Suite 700		Transaction ID : 20724.C15952											
City Washington	State DC	Zip Code 20004											
FEC ID number of contributing federal political committee. C C00106146		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
Name of Employer		Occupation											
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>4000.00</td> </tr> </table>						4000.00					
				4000.00									

C. Full Name (Last, First, Middle Initial) Owner Operator Ind. Drivers Assn. PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		11		2012
M M	/	D D	/	Y Y Y Y									
07		11		2012									
Mailing Address P.O. Box 1000 1 NW Ooida Drive		Transaction ID : 20720.C15943											
City Grain Valley	State MO	Zip Code 64029											
FEC ID number of contributing federal political committee. C C00236778		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									
Name of Employer		Occupation											
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>9500.00</td> </tr> </table>						9500.00					
				9500.00									

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

Boehringer Ingelheim PAC

Mailing Address 1201 Pennsylvania Avenue, NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00420398

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
07 18 2012

Transaction ID : 20724.C15954

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

Midcountry Financial Corp. PAC

Mailing Address 201 Second Street
Suite 950

City State Zip Code
Macon GA 31201

FEC ID number of contributing
federal political committee.

C C00480673

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 11 2012

Transaction ID : 20720.C15942

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

6000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. The Gula Graham Group

Mailing Address 700 12th St. NW

City	State	Zip Code
Washington	DC	20006-

Purpose of Disbursement
Catering Food & Refresh. Fax Exps

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

Amount of Each Disbursement this Period

1118.94

Transaction ID : 20720.E5840

CATERING FOOD & REFRESH. FAX EXPS

B. UMB Visa

Mailing Address 1010 Grand Boulevard

City	State	Zip Code
Kansas City	MO	64106-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

Amount of Each Disbursement this Period

265.73

Transaction ID : 20720.E5846

CREDIT CARD: SEE BELOW

c. Federal Express Shipping

Mailing Address 2903 Sprinkle Avenue

City	State	Zip Code
Memphis	TN	38118-

Purpose of Disbursement
Shipping Charges

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2012

Amount of Each Disbursement this Period

143.73

Transaction ID : 20720.E5849

[MEMO ITEM]
MEMO: SHIPPING CHARGES**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1384.67

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Aladin Storage, Inc.

Mailing Address 701 North 291 Highway

City	State	Zip Code
Liberty	MO	64068-

Purpose of Disbursement
Storage Rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 02 / 2011

Amount of Each Disbursement this Period

122.00

Transaction ID : 20720.E5850

[MEMO ITEM]

MEMO: STORAGE RENTAL

B. Country Club Bank

Mailing Address PO Box 410889

City	State	Zip Code
Kansas City	MO	64141-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 18 / 2012

Amount of Each Disbursement this Period

11.35

Transaction ID : 20720.E5854

CREDIT CARD: SEE BELOW

c. UMB Visa

Mailing Address 1010 Grand Boulevard

City	State	Zip Code
Kansas City	MO	64106-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 11 / 2012

Amount of Each Disbursement this Period

250.00

Transaction ID : 20720.E5845

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

261.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Event Farm

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Costa Mesa	CA	92627-

Amount of Each Disbursement this Period

Purpose of Disbursement
Tickets

250.00

Candidate Name

Transaction ID : 20720.E5848

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

MEMO: TICKETS

State: District:

Full Name (Last, First, Middle Initial)

B. The Gula Graham Group

Mailing Address 700 12th St. NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Washington	DC	20006-

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Management Fee

2000.00

Candidate Name

Transaction ID : 20720.E5841

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

FUNDRAISING MANAGEMENT FEE

State: District:

Full Name (Last, First, Middle Initial)

c. The Gula Graham Group

Mailing Address 700 12th St. NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Washington	DC	20006-

Amount of Each Disbursement this Period

Purpose of Disbursement
Facility Fee Event & Fax Expenses

352.42

Candidate Name

Transaction ID : 20720.E5842

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

FACILITY FEE EVENT & FAX EXPENSES

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2352.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Mid States Services

Mailing Address 2626 Oklahoma Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Trenton	MO	64683-

Amount of Each Disbursement this Period

525.00

Purpose of Disbursement
Web Hosting**Transaction ID : 20720.E5844**

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

WEB HOSTING

State: District:

Full Name (Last, First, Middle Initial)

B. Axiom Strategies LLCMailing Address 1251 NW Briarcliff Parkway
Suite 85

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Kansas City	MO	64116-

Amount of Each Disbursement this Period

5225.00

Purpose of Disbursement
Campaign Mgmt. Fee & Postage**Transaction ID : 20720.E5838**

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

CAMPAIGN MGMNT. FEE & POSTAGE

State: District:

Full Name (Last, First, Middle Initial)

C. Endis Inc.

Mailing Address 3002 East Sunshine Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2012

City	State	Zip Code
Springfield	MO	65804-

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement
Website Subscription Fee**Transaction ID : 20720.E5839**

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

WEBSITE SUBSCRIPTION FEE

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5375.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. The Gula Graham Group

Mailing Address 700 12th St. NW

City	State	Zip Code
Washington	DC	20006-

Purpose of Disbursement
Fundraising Fees & Commissions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 18 / 2012

Amount of Each Disbursement this Period

21320.00

Transaction ID : 20720.E5856

FUNDRAISING FEES & COMMISSIONS

B. The Gula Graham Group

Mailing Address 700 12th St. NW

City	State	Zip Code
Washington	DC	20006-

Purpose of Disbursement
Fundraising Management Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 11 / 2012

Amount of Each Disbursement this Period

2000.00

Transaction ID : 20720.E5843

FUNDRAISING MANAGEMENT FEE

c. Country Club Bank

Mailing Address PO Box 410889

City	State	Zip Code
Kansas City	MO	64141-

Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 06 / 2012

Amount of Each Disbursement this Period

141.76

Transaction ID : 20723.E5890

BANK SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

23461.76

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. UMB Visa

Mailing Address 1010 Grand Boulevard

City	State	Zip Code
Kansas City	MO	64106-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 11 / 2012

Amount of Each Disbursement this Period

4810.01

Transaction ID : 20720.E5847

CREDIT CARD: SEE BELOW

B. House Members CafeMailing Address U.S. Capitol
Room H-118

City	State	Zip Code
Washington	DC	20215-

Purpose of Disbursement
Refreshment

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 06 / 2012

Amount of Each Disbursement this Period

14.95

Transaction ID : 20720.E5857

[MEMO ITEM]

MEMO: REFRESHMENT

c. FreedomPay

Mailing Address 565 E. Swedesford Road

City	State	Zip Code
Wayne	PA	19087-

Purpose of Disbursement
Expense/Fundraising Efforts

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2012

Amount of Each Disbursement this Period

60.00

Transaction ID : 20720.E5858

[MEMO ITEM]

MEMO: EXPENSE/FUNDRAISING EFFORTS

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4810.01

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Wing Nuts

Mailing Address 19206 Highway O

City Tarkio State MO Zip Code 64491-

Purpose of Disbursement
Aviation Travel Expense

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 09 / 2012

Amount of Each Disbursement this Period

669.82

Transaction ID : 20720.E5861

[MEMO ITEM]

MEMO: AVIATION TRAVEL EXPENSE

B. Quality Inn

Mailing Address 120 Lindsey Drive
Hwy. 36

City Hannibal State MO Zip Code 63401-

Purpose of Disbursement
Travel Expense: Lodging

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 13 / 2012

Amount of Each Disbursement this Period

229.10

Transaction ID : 20720.E5866

[MEMO ITEM]

MEMO: TRAVEL EXPENSE: LODGING

c. Capitol Hill Club

Mailing Address 300 1st Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Catering for Fundraising Events

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2012

Amount of Each Disbursement this Period

944.86

Transaction ID : 20720.E5870

[MEMO ITEM]

MEMO: CATERING FOR FUNDRAISING EVENTS

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. King Street Blues

Mailing Address 112 North Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314-

Purpose of Disbursement
Restaurant Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2012

Amount of Each Disbursement this Period

131.68

Transaction ID : 20720.E5872

[MEMO ITEM]

MEMO: RESTAURANT MEALS

B. Delta Airlines

Mailing Address 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30320-

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 22 / 2012

Amount of Each Disbursement this Period

50.00

Transaction ID : 20720.E5873

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

c. Hyatt Hotels

Mailing Address 100 Heron Blvd

City	State	Zip Code
Cambridge	MD	21613-

Purpose of Disbursement
Hotel Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 23 / 2012

Amount of Each Disbursement this Period

199.24

Transaction ID : 20720.E5875

[MEMO ITEM]

MEMO: HOTEL TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. West Yellowstone Airport

Mailing Address 721 Yellowstone Airport Road

City	State	Zip Code
West Yellowstone	MT	59758-

Purpose of Disbursement
Travel Expense: Aviation Fuel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2012

Amount of Each Disbursement this Period

214.20

Transaction ID : 20723.E5895

[MEMO ITEM]

MEMO: TRAVEL EXPENSE: AVIATION FUEL

B. Candidate Command LLCMailing Address 1831 NW Vivion
Suite 101

City	State	Zip Code
Riverside	MO	64150-

Purpose of Disbursement
Direct mail printing and postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2012

Amount of Each Disbursement this Period

10376.00

Transaction ID : 20720.E5851

DIRECT MAIL PRINTING AND POSTAGE

C. AT&T Mobility

Mailing Address P.O. Box 940012

City	State	Zip Code
Dallas	TX	75394-

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2012

Amount of Each Disbursement this Period

159.31

Transaction ID : 20720.E5853

TELEPHONE SERVICE

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10535.31

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Boyles Motors Inc.Nature of Debt (Purpose):
Vehicle Lease

Mailing Address 204 North Market Street

City State

Zip Code

Maryville

MO

64468-

Outstanding Balance Beginning This Period

500.00

Transaction ID : LS60802.E42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

KWRT-AM / KWRT-FMNature of Debt (Purpose):
Radio Advertising

Mailing Address 1600 Radio Hill Road

City State

Zip Code

Boonville

MO

65233-

Outstanding Balance Beginning This Period

857.65

Transaction ID : LS60802.E45

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Willard DowdenNature of Debt (Purpose):
Rent for Nodaway Co. Republican Com

Mailing Address Route 1, Box 116

City

State

Zip Code

Burlington Junctio

MO

64428-

Outstanding Balance Beginning This Period

200.00

Transaction ID : LS60802.E46

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1557.65

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Missouri Right to Life PAC

Nature of Debt (Purpose):

Membership Labels

Mailing Address PO Box 651

City State

Zip Code

Jefferson City

MO

65102-

Outstanding Balance Beginning This Period

1087.00

Transaction ID : LS60802.E49

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Lukens Company

Nature of Debt (Purpose):

PrintingMailPostageData

Mailing Address 2800 Shirlington Road - 9th Floor

City State

Zip Code

Arlington

VA

22202-

Outstanding Balance Beginning This Period

1877.76

Transaction ID : LS90415.E4278

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1877.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stor Safe

Nature of Debt (Purpose):

Storage Rental

Mailing Address 1501 Burlington

City

State

Zip Code

Kansas City

MO

64116-

Outstanding Balance Beginning This Period

1000.00

Transaction ID : LS81203.E4051

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

3964.76

2) **TOTALS** This Period (last page this line number only) ▶

5522.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

5522.41